ISSUE STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE					
FEE DETERMINATION								
O.I.P.E. CLASSIFIER		6	9-28-01					
FORM/LITY REVIEW								
RESPONSE FORMALITY REVIEW								

INDEX OF CLAIMS

~	Rejected	N.	Non-elected
	Allowed	1.	Interference
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	Restricted	0 .	Objected

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If more than 150 claims or 10 actions staple additional sheet here

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